DECATION FOR UNITED STATES PATENT Declaration and Power of Attorney

00 p00252 US

JUL 0 2 2002 As a below named inventor, I hereby declare that:

| My residence, po | st onice ma | and citizer | isnip are as state | a below ne | ext to my i | name; that | | | |
|---|----------------------------|-----------------------|--------------------|------------------|--------------|----------------|--------------|----------------|--|
| I verily believe the (if plural inventors are named 1 METHOD OF | ned below) o | f the subject m | | | | | | | |
| described and claimed in t | | | | | | | | | |
| Check one | L | | | | | | | | |
| *a. [] attached l b. [⊀] filed onF | | 28,2002as A | pplication Serial | No.1 <u>0/08</u> | 4,658 | _ and amend | ded on(i | f applicable) | ; |
| I hereby state that by any amendment referre | | ewed and unde | erstand the conte | nts of the a | ıbove-iden | tified applica | ition, inclu | ding the clair | ns, as amended |
| I acknowledge the accordance with Title 37, application(s) filed within | Code of Fede | ral Regulation | s, §1.56(a). Und | er Title 35 | | | | | |
| | | | | | | | | | |
| The following ap American either (a) more to | than one year | prior to this a | pplication, or (b) | before the | filing date | of the above | e-named fo | reign priority | |
| Japa 2 If there are no correspo insert "NONE". | inese Pat nding applica | ent Applic utions, | cation No. | 2000-11 | 6,654 f | iled Ap | ril 18, | 2000 | |
| I hereby appoint | • | • | s of record with | full power | of substitu | tion and revo | ocation to p | rosecute this | application and |
| to transact all business in | the Patent Of | fice: | | | | | | | |
| Roger W. Parkhu | ırst, Reg. No. | . 25,177; Charl | es A. Wendel, F | Reg. No. 24 | ,453; and/ | or Lawrence | D. Eisen, | Reg. No. 41, | 009 |
| ALL CORR | | | | | | | | | |
| TO PARKHURST | | EL, L.L.P | ., 1421 Prin | ce Stree | t, Suite | 210, Alex | kandria, | Virginia | 22314-2805 |
| Telephone: (703) 73 | 9-0220. | | | | | | | | |
| I hereby declare | that I have re | viewed and ur | iderstand the cor | itents of thi | is Declarat | ion and that | all statem | ents made he | rein of my own |
| knowledge are true and the | | | | | | | | | |
| with the knowledge that w | villful false st | tatements and | the like so made | are punish | able by fir | ne or impriso | nment, or | both, under | Section 1001 of |
| Title 18 of the United State | s Code and th | nat such willful | false statements | may jeopar | dize the va | didity of the | application | _ | issued thereon. |
| 3 Typewritten Full Name | of | | | | | | | 177 | |
| Sole or First Inventor | | Ken | | · | | FUKUTA | | | |
| | | Given | Name | Mi | iddle Initia | 1 | Fan | nily Name | <i>2</i> 0 |
| #4.7 4. G! | | | Ken | | | Fuki | ita | .00 E | |
| *4 Inventor's Signature | E8* | | , | | | · NR | <u>a u</u> | R T | 11 |
| 5 Date of Signature | | April | 26, | 2002 | | | | | And the second s |
| 3 | | Month | | | Day | | Year | 87. [2][| |
| C Decidence | Magazz | a City, | Aichi P | rof | | Japan | | 280 | |
| 6 Residence | City | a CILY, | State or Provi | | | Uapaii | Country | 8 | |
| 7 CitizenshipJ | [apanese | | | | | | | | · |
| 8 Post Office Addr | ress | c/o NGK | INSULATOR | S, LTD. | , 2-57, | Suda-Ch | o, Mizu | ho-Ku, Na | agoya City, |
| (Insert complete | | | | | | | ' | | |
| address, includin | | Aichi E | ref., Japan | n | | | | | |

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to the Inventor. Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

| 3 Typewritten Full Name of | Akio | | | ENOMOTO | | | | | |
|--|----------------|--------------------|--|---------------------------------------|--|-----------|-------------|---------|--|
| Second Joint Inventor (if any) | | Mic | Middle Initial Family Name | | | | | | |
| 4 Inventor's Signature | | AMO | En | emoto | | | | | |
| Date of Signature | April | 26, | 200 |)2 | | | | | |
| Date of organitute | Month | | | Day | | | Y | ear | |
| Residence Nagoy | a City, | Aichi | Pref., | J | apan | | - <u>-</u> | | |
| Citizenship Japanese | City | State | or Province | | | Country | | | |
| Post Office Address | c/o NGK | INSULATORS, | LTD., 2-56 | 6, Suda-C | ho, Mizu | iho-Ku, N | Iagoya | City, | |
| (Insert complete mailing address, including country) | Aichi Pr | ef., Japan | | | | | | | |
| Typewritten Full Name of | | mi ii | | | TERO | | | | |
| Third Joint Inventor (if any) | | Eiji Given Name | Mie | ddle Initial | ITO | Family Na | me | · | |
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| Residence | City | State | or Province | | | Country | | | |
| Citizenship Japanese | | | | | | | | | |
| Post Office Address | c/o NGK | INSULATORS | , LTD., 2-5 | 6, Suda- | Cho, Miz | uho-Ku, | Nagoya | City | |
| (Insert complete mailing address, including country) | Aichi P | ref., Japan | | | | | | | |
| Typewritten Full Name of | | | | | | | | | |
| Fourth Joint Inventor (if any) | | Given Name | Mi | ddle Initial | | Family Na | me | | |
| Inventor's Signature 🐷 | | | | | | | | | |
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| Post Office Address (Insert complete mailing address, including country) | | | | | | | | | |
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| Typewritten Full Name of Fifth Joint Inventor (if any) | | Given Name | Mi | iddle Initial | | Family Na | ame | | |
| Inventor's Signature | | | | | | | | | |
| Date of Signature | Month | | | Day | | | 7 | ear ear | |
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| Citizenship | City | Stat | e or Province | | | Country | | | |
| Post Office Address (Insert complete mailing address, including country) | | | | | | | | | |

^{*}Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

**This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims)

of the application to which it pertains.